

U.S. Department
of TransportationNational Highway
Traffic Safety
Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT

1-888-327-4236

www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY

252

Date Received

02-MAY-2000

Od_or

rt_dt

od_rt

up_ltr

Reference No.

861264

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☐ YES ☐ NO
 In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner

Date ____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (located at front of windshield or driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
	GMC	SAFARI	1996	

Purchase Date	Dealer's Name	Engine Size (CID/CC/L)	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
☐ New ☒ Used	City	State	Zip Code

Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☒ Van ☐ Minivan ☐ Other	Body Style ☐ Sport Vlt ☐ Truck ☐ Motorcycle ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 10310000	Part Name(s) VISUAL SYSTEMS:WINDSHIELD WIPER	Location ☐ Left ☐ Front ☐ Right ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No. of Failures	Dates of Failure(s) 02-MAY-2000 Mileage at Failure(s) Vehicle Speed at Failure(s)	Failed Part(s) Available? Yes No	NHTSA Previously Contacted? Yes No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)

Crash ☐ Yes ☒ No	Fire ☐ Yes ☒ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WINDSHIELD WIPERS WORK INTERMITTENTLY. *AK

CONTINUE ON BACK IF NEEDED

The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.



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Defect Date

00 AUG -1 PM 2:5
02-MAY-2000

OFFICE
DEFECTS INVESTIGATION

Od_or _____
Pt_dt _____
od_rt _____
up_itr _____

Reference No.

861264

OWNER INFORMATION (Type or Print)

606648

Work Number

Home Number

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO

In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner

Date 6/15/00

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 1GKDM19W2TB53486
Vehicle Make GMC
Vehicle Model SAFARI
Vehicle Year 1996
Current Odometer Reading 61,745

Purchase Date 7/98
Dealer's Name COOPER BUICK-GMC
City MOBILE State LA Zip Code 36681
☐ New ☒ Used
Engine Size (CID/GCC/L) _____
No Cylinders 6
☐ Turbo
☐ Diesel
☐ Gas
☐ Fuel Injection

Transmission Type ☐ Manual ☒ Automatic
Antilock Brakes ☐ Yes ☒ No
Restraint System ☒ 3-Point Belt ☐ Motorbelt
☒ Driverside Airbag ☐ 2-Point Belt
☒ Passengerside Airbag
Cruise Control ☒ Yes ☐ No
Drive Train ☐ Front ☒ Rear ☐ 4-Wheel
Vehicle Type ☒ Car ☐ Sport Ut
☐ Van ☐ Truck
☐ Minivan ☐ Motorcycle
☐ Other
Body Style ☐ 2-Door
☐ 4-Door
☐ Stationwagon
☐ Pick Up Truck
☒ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 10310000
Part Name(s) VISUAL SYSTEMS:WINDSHIELD WIPER
Location ☐ Left ☐ Right
☐ Front ☐ Rear
Failed Part(s) ☒ Original
☐ Replacement
No of Failures MULTIPLE
Date(s) of Failure(s) 02-MAY-2000
Mileage at Failure(s) 61,238
Vehicle Speed at Failure(s) VARIES
Failed Part(s) Available? ☒ Yes ☐ No
NHTSA Previously Contacted? ☐ Yes ☒ No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form)

Crash ☐ Yes ☒ No
Fire ☐ Yes ☒ No
Number of Persons Injured N/A
Number of Fatalities N/A
Estimated Property Damage N/A
Reported to Police ☐ Yes ☒ No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

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